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Nicholas Tonti-Fillipini

John Paul II Institute, ntonti-filippini@jp2institute.org

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Review: Catholic Bioethics for a New Millenium

Review: Catholic Bioethics for a New Millennium

Nicholas Tonti-Fillipini

Anthony Fisher, *Catholic Bioethics for a New Millennium*, Cambridge University Press, Cambridge 2012, 332 pages, Hardcover \$90, Paperback \$29.95

Catholic Bioethics for a New Millennium has the distinction of being written by a distinguished bioethicist and philosopher with an Oxford doctorate in Philosophy but who is also a Catholic Bishop of the diocese of Parramatta. Bishop Anthony Fisher OP is a Dominican friar who taught Bioethics at the Australian Catholic University before becoming the founding director for the John Paul II Institute for Marriage and Family. Prior to becoming a Bishop in 2003 and auxiliary to the diocese of Sydney, he had established a strong reputation for his publications in Bioethics including several books on topics such as abortion and euthanasia which he had written while still a law student at the University of Sydney.

Bishop Fisher is currently a member of the Pontifical Academy for Life, a Permanent Fellow and Professor at the John Paul II Institute for Marriage and Family, Melbourne, and an Adjunct Professor of Bioethics at the University of Notre Dame, Sydney. He is also Chairman of the Catholic Education Commission of New South Wales, a member of the Australian Bishops' Commission for Doctrine and Morals, and the Bishops' Commission for Health and Community Services.

What may not be so well known about him is his liking for cooking and to some extent the latter may be reflected in the balance of ingredients that have been included in his new book. The book covers topics such as how to do bioethics including: sexuality and modernity, conscience and authority, and cooperation in moral evil, a section on the beginning of life including topics such as when life begins, stem cells and abortion, a section on later life including transplantation, artificial nutrition and the unresponsive state, suicide and euthanasia, and finally a section on protecting life which includes reflections on the identity of Catholic hospitals and the role of a Catholic politician.

That the author is both a philosopher and a bishop is reflected in his writing, which represents the partnership that the Catholic Church recognises between theology and philosophy; between faith and reason. Fisher's approach reflects the call for renewal of Theology by the Second Vatican Council with a firmer grounding in Scripture and a clearer recognition that the Christian calling is heavenward in its direction but earthly in its enactment.

Bishop Fisher suggests that as Christians we should be prepared to live the creative and hopeful teachings of our tradition about life, sexuality, marriage and family – reformulated and developed appropriately with the aid of the best of contemporary thinking (p.37). That means being willing to listen to contemporary culture, evaluating it against the call to be in communion with God that is our human destiny. Philosophy has a defined role, not in the absence of theology, but in partnership with it and all the other cultural approaches. We live within our cultures and we reshape them for the future in our own image, the image that informs our children. Philosophy happens within culture and not without it.

In the section on conscience, having given account of the various debates in recent times and the ways in which cooperation in moral evil has been stretched and betrayed by a casuistry that seems to reflect a tax lawyer morality of living around teaching rather than living according to God's word, he concludes by referring to the wholehearted commitment to the holy love of God, neighbour and self.

In dealing with the beginning of life, Bishop Fisher focuses his discussion on dealing exhaustively and systematically with the arguments proposed by fellow Australian, Fr. Norman Ford. The major part of that argument is that the embryo cannot be a person if it lacks individuality, and, Fr. Ford argues, it cannot be an individual if identical twinning is possible because it would be potentially many individuals. He argued that destroying life prior to the formation of the primitive streak (at the time of implantation) was more like contraception than abortion, an interference with the generative process, rather than destroying a life because an individual did not at that time exist. Fisher's treatment is respectful but thorough in exploring the variety of claims that Ford makes. At the end of the day it is clear on Fisher's analysis that a new life comes to be at fertilization and what happens from that point is the development of that entity towards adulthood if it has adequate nourishment and a favourable environment. That it may also reproduce asexually like an amoeba or like a cutting taken from a plant is no more of a challenge to individuality than our ability to recognise an individual amoeba or tree. It is no more of a challenge than the fact that anyone of us might, given contemporary technology, be cloned from a single cell. If Ford's thesis was sound, the advent of cloning would have jeopardized the individuality of all of us.

Identical twinning is no more of a challenge than two parents dividing off gametes that unite to form a third person sexually. Asexual reproduction simply means the formation of second individual from the first individual, not a loss of individuality of the first. The formation of an identical twin is known to be a random event that does not run in families and thus appears not to have a genetic basis. In fact, in the laboratory any embryo can be artificially cloned by forcing a division between the cells within the embryo to form genetically identical embryos. Of course they do not remain identical for long. The process of cell replication and environmental effects soon produce small genetic changes so that adult identical twins can be distinguished genetically, even though they have close similarities.

A brief chapter on stem cells deals with the question of destroying human embryos to obtain their stem cells for the purposes of research and possibly treatment, though the latter has not been as forthcoming as originally claimed. There are no established therapies using embryonic stem cells. In the book, there is an all too brief discussion of alternative methods of producing embryonic stem cells, such as by providing "embryoid bodies". This section catalogues a variety of philosophical and theological arguments for recognising the moral status of the human embryo, but does not do justice to the amount of literature produced on the question of altering gametes before fertilization by adding or subtracting genes in order to have an entity that has embryonic stem cells but does not have the capacity to develop to human adulthood. This process has been called "altered nuclear transfer".

Perhaps in a future publication Bishop Fisher might discuss the range of possibilities for forming human-animal hybrids. As well as combining an enucleated animal egg with a human cell, there is also human-animal transgenesis. The latter may yield an embryo that has some animal and some human genes. This book later mentions xenotransplantation, but not the now related issue of human animal transgenesis which is currently proposed as a way of producing animals whose organs could be transplanted into humans without rejection. The process involves forming an embryo from an animal but that has some human genes replacing some animal genes. This hybrid embryo is then developed to adulthood when organs may be harvested for human transplant. The process prompts

questions about how many, if any, human genes, may be added to an animal embryo, and what is the status of a human-animal hybrid of this limited kind? Is this a misuse of the generative capacity contained within the human genome and in its being inherited or partially inherited in this case?

There is also the possibility of forming gametes from ordinary cells and then causing an embryo to be formed by fertilization, or forming an embryo by inducing pluripotentiality in an ordinary cell (IPS cell) to such an extent that it is capable of embryogenesis. This has been achieved in animal studies. These possibilities prompt questions about when an entity should be considered an embryo and whether such procedures should be permitted. Might an infertile couple achieve pregnancy through gametes created from their ordinary cells? Might a man or a woman achieve an embryo from a single cell by induced pluripotentiality techniques? Bishop Fisher provides a definition of an embryo that would assist these discussions but does not explain its application to these many contemporary possibilities.

There follows a thoughtful discussion of abortion and prenatal testing. The chapter responds pragmatically to the arguments about choice and necessity, approaching the issue from what Pope John Paul II identified as a pro-woman view in *Evangelium Vitae*. Bishop Fisher concludes with advice for prolife advocates: keep proclaiming the humanity of the embryo and foetus; defend the life view as the only view that is giving women real alternatives; challenge the argument that abortion is necessary and instead insist on the virtues of choosing otherwise; focus on the role of men and their role in supporting life as fathers; demand sex education that teaches values; do sound research into social attitudes and tailor the pro-life message accordingly; and promote a culture of life and love in which women are valued, respected and supported and new life is welcome.

In approaching the issue in this way, Bishop Fisher may draw the ire of some long term pro-life campaigners who may resent his comments about the danger of seeing oneself as an ethical remnant, martyrs in a corrupt and doomed civilization, “screaming into the storm” and proclaiming a message that few listen to. There is a division in pro-life ranks between those who focus strongly on the humanity of the embryo and tackle the issue with pictures of aborted fetuses, and those who have sought to follow Pope John Paul II’s lead in seeking to support women and address the circumstances that may lead them to think that they have no choice.

In dealing with the complex area of transplantation, Bishop Fisher explains four different approaches: liberal, individualist or subjectivist approaches, communitarian or group-conscious approaches, deontological or duty-based approaches and consequentialist or results-focused approaches. He also discusses the conceptualisation of the body as property, the body as trust and as the body as personal. He argues for the latter and that tissue transfer be understood as a sharing life. In dealing with the issue of consent he argues for great care being taken to ensure that there is no undue financial or other pressure on the donor.

In a future publication Bishop Fisher may also address the issue of the diagnosis of death beyond referring to Pope John Paul II’s statement in 2000 that includes the “loss of integration” explanation for accepting death by the “loss of all brain function” criterion. Since then we have had the 2008 US President’s Commission which rejected the integration explanation and opted instead to diagnose death by loss of consciousness and loss of spontaneous breathing. The Commission called that the “mode of being view”. There have also been claims made by Alan Shewmon and others that the body retains integration other than through brain function. This has led to many influential Catholic theologians, including Robert Spaeman who is said to be close to Pope Benedict XVI, rejecting the

diagnosis of death by the brain criterion. This is an area of great confusion and needs careful resolution by someone of Bishop's Fisher's authority and philosophical skills.

While objecting to trade in human tissue in this book, in the future, Bishop Fisher might also address the contemporary issue of trade in products derived from human tissue. This is an issue for such things as bone paste and bone screws, skin cultures, muscle cultures, and the burgeoning industry of human biobanks involving cultured human cells and human stem cells. Does it make a difference that what is sold is not the tissue in its original state, but a product? Does the donor have any claim if a pathology service exploits the commercial advantages of unusual characteristics of tissue made available for diagnostic purposes, such as antibodies the donor has developed to a cancer? What might the affect be on transplantation practice and its basis in altruism if potential donors realise that their altruism is being commercially exploited for the purposes for generating significant profits, such as marketing cancer antibodies? The Courts have begun to treat these issues by unfortunately applying a concept of ownership rather than custodianship. The latter would be more respectful of the donors' wishes and their bodies.

The issue of artificial nutrition and hydration (ANH) has a chapter of its own focussing mainly on people who are in an unresponsive state. The argumentation is cogent and asserts our obligations to people in that state despite their disability and asserts the significance of continuing to feed someone. It adopts the language of the National Health and Medical Research Council (NHMRC) using the more accurate phrase "post coma unresponsive state" rather than "persistent vegetative state". The latter is both prejudicial to the interests of the person, but also less medically accurate. I admit to an interest in this in having chaired the NHMRC committee that prepared national ethical guidelines for the care of people who have suffered such severe damage.

In a future book, Bishop Fisher might deal more comprehensively with the complex issues that are often faced towards the end of life following stroke or advanced diseases such as metastatic cancer, Parkinson's or Alzheimer's disease. When the time comes that a patient cannot swallow and they have a degenerative rather than stable disease, is there an obligation to initiate feeding via surgical placement of a tube? If there is already a tube in place, is there an obligation to continue? There are also questions about using tube feeding for people who can swallow, but cannot spoon-feed themselves, as a cheaper, more convenient alternative to having someone spoon-feed them. They are thus denied the pleasure and social significance of eating and drinking. These are matters about which relatives and carers of people at the end of life often have questions and some advice would be welcome.

As mentioned earlier, the final chapter of the section on later life issues addresses the matter of suicide and euthanasia. The chapter is fascinating for the fact that it addresses suicide and euthanasia in the Scriptures. It is a well researched and thoughtful reworking of an earlier essay which discussed those occasions in which the issue arises in Scripture, such as Samson, Jonah, Abimelech, Saul, Ahithopel, Judas, Zimri and Paul's gaoler. The chapter is rich in its analysis of the Christian tradition in relation to suicide and euthanasia. Those who expected an analysis of the contemporary secular arguments for legalising assisted suicide and euthanasia, the circumstances of contemporary jurisdictions that have legalised mercy killing, and the issues that arise for those who may cooperate will have to look to Bishop Fisher's other works. The section on the care of the sick and dying takes a particularly spiritual approach in its focus on the relationship between Jesus and Mary, especially in his suffering and death.

There is a chapter on Catholic hospitals. It contains a compelling analysis of the role and function of health care in the Catholic tradition, and the challenges of different approaches to maintaining Catholic identity in the face of the secular challenge to uniformly provide whatever other hospitals may provide. The chapter is important reading for those involved in Catholic health care. It is a rework of an earlier paper in which Bishop Fisher compares a modern pragmatic hospital that keeps up with its secular rivals and a more spiritually minded hospital that places emphasis on developing its pastoral approaches and nursing care rather than adopting all the technologies available. It poses the question about where one would prefer to die: with the best of technology or with the best of nursing care and attention.

The final chapter discusses the role of politicians and the issue of compromise in achieving the “art of the possible”. An interesting comparison is made between three quite different approaches to being a politician. This is a quite novel approach to analysing the issue of maintaining one’s own moral integrity, making prudent decisions to improve the law even if in the political circumstances one cannot achieve the ideal. It is helpful that the discussion focuses on examples of different approaches and this chapter will greatly interest both politicians and activists.

Bishop Fisher has made an interesting contribution to Catholic Bioethics. It is clearly intended to be instructive for those who wish to better understand what the Church teaches and why and is unafraid to approach the issues theologically for complete answers rather than the sometimes more limited answers afforded by natural law alone.

Throughout there is the caution of a writer who knows that he is not just a philosopher or theologian but has significant teaching authority as a Bishop. It may be the latter that led him to leave areas of significant unresolved controversy within the Church for perhaps for the future when those matters are more resolved. That includes matters such as diagnosing death, human-animal transgenesis, altered nuclear transfer, advanced directives, trade in human tissue products and end of life artificial nutrition and hydration. There are also other areas that would be worthy of Bishop Fisher’s lucidity, such as ethical issues in the care of those with mental illness, the care of people with disability, the over-medicalisation of children’s behaviour problems, resource allocation issues (about which he has undertaken extensive research elsewhere), reproductive technology and related issues such as so-called “embryo adoption” which has been addressed in the 2008 Magisterial document *Dignitas Personae*, the care of people with gender dysphoria or other disorders of gender development, and education in sexuality, including the contemporary difficulties over how to approach homosexuality. Dealing with the issue of education in sexuality will be especially important in the efforts being made to implement a national curriculum in Australia following experiences overseas. The leadership of the Church is essential.

The publication of *Catholic Bioethics for a New Millennium* is an event that is of major significance to the community of Christ’s faithful. It is an authoritative, lucid and at times novel treatment of some important topics and considerably adds to understanding of many issues, while steering a careful course around issues that remain unresolved within our tradition.